2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000029677

Address:

City-St-Zip:

Entity Name: MCNULTY LOFTS INVESTMENT COMPANY, LLC

FILED Apr 29, 2005 Secretary of State

200 CENTRAL AVENUE, SUITE 2300

ST. PETERSBURG, FL 33710 US

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|------------------------------------|------------------------------------|---|--|
| 200 CENTRAL AVENUI ST. PETERSBURG, FL | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 200 CENTRAL AVENUI ST. PETERSBURG, FL | | | | |
| FEI Number: 26-0083908 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address o | Name and Address of New Registered Agent: | |
| CFRA, LLC CORPORATE CENTER 4221 W. BOY SCOUT E TAMPA, FL 336075736 | | | | |
| The above named entity in the State of Florida. | v submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both | |
| SIGNATURE: | | | | |
| Electronic Signature of Registered Ag | | ent | Date | |
| MANAGING MEMBERS/MEMBERS: | | ADDITIONS/CHANGES: | | |
| Title: (|) Delete | Title: MGR | () Change (X) Addition | |

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOEL B. GILES MGR 04/29/2005